

10801 Cosmonaut Blvd. Orlando, FL 32824 Phone 407.859.8166

www.av-imagineering.com

Fax: 407.859.8254

July 9, 1999

Manuel Karos
Center for Devices and
Radiological Health
CDRH – HF Z300
2098 Gaither Road
Rockville, MD 20850



Dear Manuel,

In our most recent telephone conversation regarding AVI's variance for the Omniscan Model 2000 Series, the minimum lateral distance of 2 ½ feet for the restricted area was clarified.

Enclosed are the Variance Applications for the American Museum of Natural History's Space Theater and Big Bang Theater. Please note that the lateral distances indicated on the diagrams comply with the minimum lateral distance of 2 ½ feet for our initial approved variance for the Omiscan Model 2000 Series. (Reference "Attachment J, figure 1").

AVI requests that the minimum lateral distance of 2 ½ feet be specified in these and future variances for Omniscan Model 2000 Series permanent planetarium theater installations.

Please let me know if you have any questions or need additional information.

Yours truly,

Joanne Young

Managing Director

JY:m

Enclosures

34435 29-1 9941977

DEPARATMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE

APPLICATION FOR A VARIANCE OR DEVICE

with Approval impossing					
Esperatura Date: Adjust 11, 1966					
DOCKET NUMBER					

FROM 21 CFR 1040.11(c) FOR A LASER LIGHT SHOW, DISPLAY, FOOD AND DRUG ADMINISTRATION NOTE: No laser light show, projection system, or device may vary from compliance with 21 CFR 1040.11(c) in design or use without the approval of this application in accordance with 21 CFR 1010.4. INSTRUCTIONS I. Check all applicable boses and type or print the requested L. Mail your application to the Docket-Management Branch (HFA-Jul), floor and Drug Administration, Room 4-62, Sum Foners Lane, Rockelle, MD 20057. 4. Enter Document Number it essigned information 2. Submit an original and fout (4) copies I. NAME OF COMPANY American Museum of Natural History - Space Theater 2 ADDRESS OF COMPANT (Indicate /IP CODE) (U FO But is most implicate a control of the control of 81st St. @ Central Park West, New York, NY 10024 1 NAME AND TITLE OF RESPONSIBLE PERSON 4. TELEPHONE NO. Umlink Jes Links 5. DATE OF SUBMISSION 7/8/99 212-769-5900. Julio Marrero PRODUCT DESCRIPTION AND USE 4. UST NAME AND OR MODEL NUMBER(S) FOR THE LASER LIGHT SHOWS AND PROJECTORS OMNISCAN Laser Projection System, Model 2000 D. PRODUCT FOR WHICH A VARIANCE IS REQUESTED I PRODUCT IS INTENDED TO BE USED AT ANY ONE LOCATION A LASER DISPLAY DEVICE MORETHAN 15 DAYS A PROJECTOR FOR A LASER LIGHT SHOW MORE THAN 5 BUT NOT MORE THAN 15 DAYS A LASER LIGHT SHOW LESS THAN 5 DAYS OTHER DIRECTOL g. TOUR IS INTENCED TO RUN FOR C. PROJECTORS ARE INTENDED FOR SALE, LEASE, OR LOAN TO OTHER MORETHAN & MONTHS LASER LIGHT SHOW PRODUCERS 1-5 MONTHS d. PRODUCT IS INTENDED FOR USE IN A LESS THAT I MONTH PLANETARIUM OR OTHER DOME PROJECTION STRUCTURE TY NOT APPLICABLE (AND IS IN-THEATER OTHER (VertA) HOTELMOTEL BALLROOM OF MEETING ROOM STORE DISPLAYS A PRODUCT UTILIZES THE FOLLOWING LASER EFFECTS TRADE SHOW OR CONVENTION K FRONT SCREEN PROJECTIONS HEAR SCREEN PROJECTIONS DISCOTHEQUE OR NIGHT CLUB HOLOGRAPHIC DISPLAYS PAVILION MULTIPLE REFLECTION/DIFFRACTION EFFECTS INDOOR ARENA AUDIENCE SCANNING IAM ARTINIA SEINIAE MIT MERCHANING ARTHUR OUTDOOR ARENA REFLECTIONS FROM STATIONARY MIRRORS OR MIRRORED SURFACES MUSEUM OUTDOOR UNENCLOSED AREA STATIONARY IRRADIATION OF ROTATING MIRROR BALLS, ETC OTHER (New (/-) _ SCANNING IRRADIATION OF ROTATING MIRROR BALLS ETC e. PRODUCT IS INTENDED TO BE USED FIBER OPTIC PROJECTIONS AT ONLY ONE UNITA LOCATION FOG. SMORE, OR OTHER SCATTERING ENHANCEMENT EFFECTS AT A VARIETY OF (INIT) LOCATIONS OTHER I PROPERTY OTHER (April)_ LASER RADIATION LEVELS PEAR POWER . Harry LASER MEDIUM -IT. HE NO. IN. WAVE LENGTHS (AM) Mixed Gas Ion Laser 458NM - 647NM 8 Watts CW 9. IF ANY LASER RADIATION IS PULSED OR SCANNED, GIVE THE PULSE DURATION AND MATE AND SCANNING FREQUENCY AND AMPLITUDE Please refer to attachments ID REASON FOR REQUESTING VARIANCE X COMPLIANCE WITH THE LIMITS OF 31 CFR 1040 11Kg WOULD RESTRICT THE INTENDED USE OF THE PRODUCT BECAUSE COMPLIANCE WOULD LIMIT THE OUTFUT POWER TO THE EXTENT THAT THE DESIRED EFFECTS WOULD NOT BE SUFFICIENTLY VISIBLE OTHER OR ADDITIONAL EXPLANATION . TOTAL

Ďι	:t-08	99	10:02	From-	T-269 P.08/09 F-401
	X			O TO DEVIATE FROM THE PROVISIONS OF 21 CFR 1040.11(c) II HISSION LIMITS SPECIFIED IN 21 CFR 1040.11(c).	THAT THE ACCESSIBLE EMISSION LEVEL WOULD EXCEED THE
,				TO DEVIATE FROM THE PROVISION OF 21 CFR 1040.11(c) AS	FOLLOWS:
					×
					•
				DERIVED FROM SUCH DEVIATION	
16.	X	LAS EXC	er light sh Ess of the	EDERVED FROM SOCK DEVIATION HOWS AND DISPLAYS ARE ACCEPTED POPULAR MEDIA IN EI E LIMITS IMPOSED BY 21 CFR 1040,11(c) IS NECESSARY TO AC INTIONAL ADVANTAGES (describe and explain)	ntertainment and the arts. Use of power levels in Chieve the required effects in These media.
13. EXPLAIN THE ALTERNATE MEANS OF RADIATION PROTECTION TO BE PROVIDED. (Chack as many boxes as apply, in Item 14 "Remarks," is not checked, using auditional sheets as necessary. State any other means of radiation protection that will be used.)					
	a .		TIONS OF TH		CERTIFIED TO COMPLY WITH 21 CFR 1040.10 AND THE CONDI- I CFR 1002.10 AND 1002.12 USING THE REPORTING GUIDES PRO- PRIOR TO ANT INTRODUCTION INTO COMMERCE.
	Þ.	X	ADDED UNT	IOT SPECIFICALLY INDICATED IN THIS VARIANCE APPLICATION TIL AN AMENDMENT TO THE VARIANCE HAS BEEN OBTAINE! LE, HAVE BEEN SUBMITTED.	on will not be performed. No other effects will be d and the required reports or supplements, as
	c,	₩.	ACCESSIBLE		L radiation (Light show radiation) into audience or othe For diffuse reflections produced by the atmosphere.
	a.		ANY SURFAMETERS BEI		TO VIEW RADIATION ABOVE THE LIMITS OF CLASS I OR BE
	₿.	×	SAFEGUARD	uct which relies on scanning to meet access, expose RD system which directly senses scanner motion an Cable Limit.	IRE, OR PRODUCT CLASS LIMITS WILL INCORPORATE A SCANNING D WHICH WILL REACT FAST ENOUGH TO PRECLUDE EXCEEDING
	t.	X	ALL LASER OPERATOR(r light shows shall be under the direct and person R(s) will:	al control of trained, competent operator(s). The
(1) IMMEDIATELY TERMINATE THE EMMISSION OF LIGHT SHOW RADIATION IN THE EVENT OF ANY UNSAFE CON					
				TATED WHERE ALL BEAM PATHS CAN BE DIRECTLY OBSERVE	
		FFI		emplotee of the variance holder who will be respo Mum laser projector output power will not exceed	NSIBLE FOR THE TRAINING AND CONDUCT OF THE OPERATOR.
	ŋ.	44	THE PROJE	ECTION SYSTEM (I.E., THE PROJECTOR AND ALL OTHER COM	PONENTS USED TO PRODUCE THE LIGHTING EFFECTS) WILL BE VEMENT OR MISALIGNMENT. BEAM LIMITERS WILL BE PROVIDED
	ı.	K	LASER PRO	OJECTORS WILL NOT BE DELIVERED TO ANY OTHER PARTY I	UNDER AN AGREEMENT OF SALE, LEASE, OR LOAN UNLESS AND IN EFFECT AT THE TIME OF DELIVERY THAT PERMITS THEM TO
	1	X.	PARTIES WI OPERATION SUBMIT THE	NHO PURCHASE, LEASE, OR BORROW THE EQUIPMENT, ADEC ON AND WHICH EXPLAIN THE RESPONSIBILITY OF THE RECIP	Facturer of laser projectors/systems will provide to Duate user's instructions for safe installation and IENT as an independent light show manufacturer to IANCE FROM CORN PRIOR TO INTRODUCTION INTO COMMERCE OF
	k,	X.	AUGNMENT PLIANCE W PROCEDUR 1430 BROAL LOCAL REC 1040 11(c), V MEANS (SUCH AS I THE RECOIL APPLICATION	NT, TESTING. AND PERFORMANCE OF EACH SHOW. THESE P WITH 21 CFR 1040 10. THE CONDITIONS OF THIS VARIANCE. A WITH 21 CFR 1040 10. THE ANSI 2136.T STANDARD FOR THE SA ADWAY. NEW YORK. NY 10018) OR ANY OTHER EQUIVALENT EQUIREMENTS LASER RADIATION AREAS WHICH CAN CONTAINED BY THE POSTING OF WARNING OCH AS PRESSURE SWITCHES. PHOTOCELLS. BARRIERS. GUIVAING SET-UP AND ALIGNMENT PROCEDURES, AND TO FINDERD OF THESE PROCEDURES AND THE RESULTS OF ALL TECTION. THE APPROVAL LETTER. CURRENT PROCEDURES. AND THE RESULTS OF ALL TECTION.	LISHED THROUGH THE USE OF WRITTEN PROCEDURES FOR SETUP. ROCEDURES WILL BE IN SUFFICIENT DETAIL TO ENSURE COM- UND THE CONTROL OF ACCESS TO RADIATION AREAS USING THE FE USE OF LASERS (AMERICAN NATIONAL STANDARDS INSTITUTE USER CONSENSUS STANDARD AND. WHERE APPLICABLE, STATE OR WIN RADIATION LEVELS ABOVE THE LIMITS SPECIFIED IN 21 CFR US SIGNS ANDIOR RESTRICTING ACCESS THROUGH PHYSICAL ARDS. ETC.). THESE REQUIREMENTS APPLY TO TEMPORARY AREAS WALL OR PERMANENT AREAS. THE VARIANCE HOLDER WILL RETAIN STS AS REQUIRED BY 21 CFR 1002.31 A COPY OF THE VARIANCE RECORDS RELATING TO EACH PARTICULAR SHOW WILL BE WITH ADE AVAILABLE FOR INSPECTION BY FDA AND OTHER RESPONSI-

- ADVANCE WRITTEN NOTIFICATION WILL BE MADE AS EARLY AS PUSSIBLE TO AFFROMENIA FEDERAL, STATE, AND WOLK ADTRIBUTED PROVIDING SHOW ITINERARY WITH DATES AND LOCATIONS CLEARLY AND COMPLETELY IDENTIFIED, AND A BASIC DESCRIPTION OF PROPOSED EFFECTS INCLUDING A STATEMENT OF THE MAXIMUM POWER OUTPUT INTENDED. SUCH NOTIFICATIONS WILL BE MADE, BUT NOT NECESSARILY BE UMITED, TO.
 - (1) THE CENTER FOR DEVICES AND RADIOLOGICAL HEALTH, OFFICE OF COMPLIANCE (HFZ312), 8757 GEORGIA AVE., SILVER SPRING, MD 20910, PROVIDING THE INITIAL AND CLOSING DATES FOR FIXED INSTALLATIONS AND THE ITINERARY FOR MOBILE SHOWS. IN ADDITION, UNLESS ALL ASPECTS OF EACH SHOW HAVE BEEN REPORTED AND THE ACCESSION NUMBERS CLEARLY REFERENCED, EACH NOTICE WILL INCLUDE DETAILED DESCRIPTIONS OF EACH SHOW AND A LISTING OF ALL EFFECTS TO BE PERFORMED IN SUFFICIENT DETAIL TO CONFIRM COMPLIANCE WITH THE REGULATIONS AND THIS VARIANCE.
 - (2) THE FEDERAL AVIATION ADMINISTRATION (FAA) FOR ANY PROJECTIONS INTO OPEN AIRSPACE AT ANY TIME (I.E., INCLUDING SET-UP, ALIGNMENT, REHEARSALS, PERFORMANCES, ETC.), IF THE FAA OBJECTS TO ANY LASER EFFECTS, THE OBJECTIONS WILL BE RE-SOLVED AND ANY CONDITIONS REQUESTED BY FAA WILL BE ADHERED TO. IF THESE CONDITIONS CAN NOT BE MET, THE OBJECTIONABLE EFFECTS WILL BE DELETED FROM THE SHOW.
 - (3) STATE AND LOCAL RADIATION CONTROL OFFICES/AGENCIES FOR ALL SHOWS TO BE PERFORMED WITHIN THEIR JURISDICTIONS. ALL REQUIREMENTS OF STATE AND LOCAL LAW WILL BE SATISFIED AND ANY OBJECTIONS RAISED BY LOCAL AUTHORITIES WILL BE RESOLVED OR THE EFFECTS DELETED. (LISTS OF FEDERAL AND STATE OFFICES ARE AVAILABLE FROM THE CENTER FOR DEVICES AND RADIOLOGICAL HEALTH UPON REQUEST.)

14.	R	ΕM	ΔF	ik S

Please refer to attachments H - K

CERTIFICATION

I CERTIFY that all of the apove information and statements are frue, complete, and correct to the best of my knowledge and acknowledge that my variance application may be defined or my variance may be revoked if this application is found to be false, misleading, or incorrect in any material way, I have submitted and will submit all reports required by 21 CFR 1002-10 and 1002-12 on the laser equipment and shows). I further understand that if may be required by regulation or by the Director, Center for Devices and Radiological Mealth, to supply such other information as may be necessary to evaluate and action this application.

15 SIGNATURE

16. NAME (Type or Ptint)

17 TITLE

mai och

Ward Davis

President